Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
		e the name that is on	Douglas		
	pictu	government-issued ure identification (for mple, your driver's	First name		First name
	licer	nse or passport).	Middle name	_	Middle name
		g your picture	Filardo		
		tification to your sting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
	maio assu	de your married or den names and any umed, trade names and og business as names.	Douglas J Filardo Douglas John Filardo		
	any such parti	NOT list the name of separate legal entity n as a corporation, nership, or LLC that is filing this petition.			
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-6084		

Del	otor 1 Douglas Filardo		Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Your Employer Identification Number (EIN), if any.				
	(=,,,	EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		27 Montauk Highway Westhampton, NY 11977			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Suffolk			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and				uals Filing for Bankruptcy		
	choosing to file under	■ Cha	pter 7							
		☐ Cha	pter 11							
		☐ Cha	pter 12							
		☐ Cha	pter 13							
В.	How you will pay the fee	_ a o	■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
			need to pay	the fee in installments. If		e this option, sig	n and attach the Applica	ation for Individuals to Pay		
			•	e in Installments (Official Fo	,	this option only	if you are filing for Char	otor 7. Ry law, a judgo may		
		b a	ut is not requipolities to you	t my fee be waived (You m uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Fili	I may do so able to pay	only if your inco the fee in insta	ome is less than 150% of allments). If you choose	of the official poverty line that this option, you must fill out		
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.								
			51	Eastern District of		0/07/04		24 74004		
			District	New York	When	9/27/21	Case number	21-71691-reg		
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to li	ne 12.						
	residence?	☐ Yes.	Has yo	ur landlord obtained an evic	tion judgme	ent against you?				
				No. Go to line 12.						
 No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it this bankruptcy petition. 							101A) and file it as part of			

Case number (if known)

Debtor 1 **Douglas Filardo**

Deb	otor 1 Douglas Filardo				Case number (if known)			
Par	t 3: Report About Any Bu	ısinesses	You Owr	n as a Sole Propriete	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of business				
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code			
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
Pari	Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	you are cash-flow § 1116(1) No.	choosing to stateme ()(B). I am to Code I am to I do not choose	to proceed under Subnt, and federal incomnot filing under Chapter 1. filing under Chapter 1.	can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. there 11. 1, but I am NOT a small business debtor according to the definition in the Bankruptcy 1, I am a small business debtor according to the definition in the Bankruptcy Code, and definite Subchapter V of Chapter 11. 1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.			
14.	Do you own or have any	■ No.			• •			
	property that poses or is							
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?				
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Chart City Chart 9 7 in C. I			
					Number, Street, City, State & Zip Code			

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Douglas Filardo			Case numl	Der (if known)
Par	6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are dersonal, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are debt vestment or through the operation of the bu	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt	■ Yes.		. Do you estimate that after any exempt pro available to distribute to unsecured creditor	operty is excluded and administrative expenses s?
	property is excluded and administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	■ 1-49		1 ,000-5,000	1 25,001-50,000
	you estimate that you owe?	☐ 50-99	1	<u> </u>	<u> </u>
		□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More than100,000
19.	How much do you estimate your assets to	□ \$0 - \$	•	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000 .001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$	550,000 001 - \$100,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion
	to be?		001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	7: Sign Below				
For	you	I have ex	camined this petition, and I de	eclare under penalty of perjury that the info	rmation provided is true and correct.
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				d not pay or agree to pay someone who is r the notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, United States Code, sp	pecified in this petition.
		bankrupt and 357	ccy case can result in fines up 1.	nt, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Dougla	glas Filardo s Filardo e of Debtor 1	Signature of Deb	tor 2
		· ·		Freedom of	
		Executed	May 10, 2023 MM / DD / YYYY	Executed on M	M / DD / YYYY

Debtor 1 Douglas Filardo		Cas	se number (if known)
For your attorney, if you are epresented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
f you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, c schedules filed with the petition is incorrect.		()
	/s/ Richard F. Artura	Date	May 10, 2023
	Signature of Attorney for Debtor		MM / DD / YYYY
	Richard F. Artura 1978006		
	Phillips, Artura & Cox Firm name		
	165 South Wellwood Avenue Lindenhurst, NY 11757 Number, Street, City, State & ZIP Code		
	Contact phone 631-226-2100	Email address	Bankruptcy@pwqlaw.com

1978006 NY Bar number & State

Fill	in this information to identify your case:		
Del	otor 1		
Del	First Name Middle Name Last Name		
(Spo	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
	e number		ck if this is an ended filing
	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible for	or eupply	12/15
info	reaction. Fill out all of your schedules first; then complete the information on this form. If you are filing amend or original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	Summarize Your Assets		
			assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	815,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,870.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	822,870.00
Par	2: Summarize Your Liabilities		
		Your	liabilities
		Amou	unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	522,238.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	8,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	4,129,776.09
	Your total liabilities	\$	4,660,014.09
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,182.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	9,126.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a person	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s <i>box</i> and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,167.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	8,000.00

Debtor 1	Douglas Filar	do					
	First Name		e Name	Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle	e Name	Last Name			
Inited States E	Sankruptcy Court for the	ne: EASTERN	DISTRI	CT OF NEW YORK			
ase number							☐ Check if this is ar amended filing
	orm 106A/B I le A/B: Pr e	opertv					12/15
		lding, Land, or Ot					
□ No. Go to P	r have any legal or equi			lence, building, land, or similar property?			
No. Go to P ■ Yes. Where	or have any legal or equi		any resid	t is the property? Check all that apply			
No. Go to P ■ Yes. Where 27 Monta	or have any legal or equi	itable interest in a	any resid		the amount of	any secured	ims or exemptions. Put I claims on Schedule D: Is Secured by Property.
No. Go to P Yes. Where 27 Mont: Street addres	or have any legal or equivart 2. e is the property? auk Highway ss, if available, or other descri	itable interest in a	what	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of a Creditors Who Current value entire propert	any secured Have Claim of the	claims on Schedule D: s Secured by Property. Current value of the portion you own?
No. Go to P Yes. Where 27 Monta Street address	or have any legal or equivant 2. e is the property? auk Highway ss, if available, or other descri	itable interest in a	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	current value entire propert \$815,0	of the cy? 000.00 nature of you	Current value of the portion you own? \$815,000.00
No. Go to P Yes. Where 1 27 Monta Street addres Westhar City	or have any legal or equivart 2. e is the property? auk Highway ss, if available, or other descri	itable interest in a	What	sis the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value entire propert \$815,0 Describe the r (such as fee s	of the cy? 000.00 nature of your simple, tenaif known.	Current value of the portion you own? \$815,000.00 our ownership interest ancy by the entireties, o
No. Go to P Yes. Where 1 27 Mont: Street addres	or have any legal or equivart 2. e is the property? auk Highway ss, if available, or other descri	itable interest in a	What	sis the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	current value entire propert \$815,0 Describe the r (such as fee s a life estate), i Tenancy by	of the cy? 000.00 nature of your simple, tena if known. y the entitions)	Current value of the portion you own? \$815,000.00 our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debt	tor 1 D	ouglas Filardo	Ca	ase number (if known)	
3. C a	ars, vans,	trucks, tractors, sport uti	ility vehicles, motorcycles		
_	No	•			
_	Yes				
	168				
3.1	Make:	Ford	Who has an interest in the property? Check one		claims or exemptions. Put
0.1	Model:	Larriott	Debtor 1 only		ured claims on Schedule D: laims Secured by Property.
	Year:	2021	Debtor 2 only	Current value of the	Current value of the
	Approxim	nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info		At least one of the debtors and another		
	Vehicle	e is leased	☐ Check if this is community property (see instructions)	\$0.00	\$0.00
Ex			TVs and other recreational vehicles, other vehicles, an onal watercraft, fishing vessels, snowmobiles, motorcycle a		
5 A	dd the do		ou own for all of your entries from Part 2, including ar Write that number here		\$0.00
		pe Your Personal and House			
Do y	ou own o	r have any legal or equita	able interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E			linens, china, kitchenware		
		Household	d goods and furnishings		\$2,500.00
					<u> </u>
E		including cell phones, came scribe	lio, video, stereo, and digital equipment; computers, printe eras, media players, games	ers, scanners; music collec	
		Electronic	s, cellphone and Ipad		\$1,500.00
E		Antiques and figurines; pair other collections, memorab	ntings, prints, or other artwork; books, pictures, or other an	t objects; stamp, coin, or b	paseball card collections;
E	xamples: \$	musical instruments	cise, and other hobby equipment; bicycles, pool tables, gol	lf clubs, skis; canoes and	kayaks; carpentry tools;
10. F	irearms		mmunition, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Douglas Fila	ardo		Case	e number (if known)	
☐ Ye	s. Describe					
11. Cloth	hes					
		lothes, furs, leather coats,	designer v	vear, shoes, accessories		
□ No						
■ Ye	s. Describe					
		Wearing apparel				\$1,250.00
40	- I					
12. Jewe Exa		ewelry, costume jewelry, er	gagement	rings, wedding rings, heirloom jewelr	y, watches, gems, ge	old, silver
☐ No	•					
■ Ye	s. Describe					
		Jewelry - watches (2	2)			\$2,000.00
-	farm animals	hinda hanaa				
Exai	<i>mples:</i> Dogs, cats,	birds, norses				
_	s. Describe					
_ 10	o. Decombe					
		Pets				\$100.00
15. Ad		of all of your entries from		ncluding any entries for pages you	have attached	\$7,350.00
Part 4:	Describe Your Finar	ncial Assets				
Do you	own or have any	legal or equitable interes	t in any of	the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you	have in your wallet, in you		a safe deposit box, and on hand wher	n you file your petitio	n
					Cash	\$200.00
Exa	institutions.			certificates of deposit; shares in credit the same institution, list each.	unions, brokerage h	ouses, and other similar
□ No	S			Institution name:		
— 16	5	Ob a alaba ar a a				
		Checking ac 17.1. ending 3159		M&T Bank		\$320.00
	_					
		or publicly traded stocks investment accounts with		e firms, money market accounts		
■ No		,vooament accounts with	Sichorage	, mmo, money market accounts		
	S	Institution or issu	ıer name:			

D	eptor 1 Douglas Filardo			Case number (if kno	wn)
19.	Non-publicly traded stock and interes joint venture □ No	sts in incorporated	d and unincorporated busine	esses, including an inte	rest in an LLC, partnership, and
	—··· ·				
	■ Yes. Give specific information about t Name of e			% of ownership:	
		Motorsports dba		100 %	\$0.00
		, , , , , , , , , , , , , , , , , , ,			
20.	. Government and corporate bonds and Negotiable instruments include personal Non-negotiable instruments are those y	al checks, cashiers ou cannot transfer	' checks, promissory notes, an	d money orders.	
	☐ Yes. Give specific information about the Issuer name.				
21.	. Retirement or pension accounts Examples: Interests in IRA, ERISA, Ked □ No	ogh, 401(k), 403(b)	, thrift savings accounts, or oth	ner pension or profit-shar	ing plans
	Yes. List each account separately.				
	Type of acco	unt:	Institution name:		
	IRA		Chase		\$0.00
22.	 Security deposits and prepayments Your share of all unused deposits you h Examples: Agreements with landlords, p No			telecommunications com	panies, or others
	☐ Yes				
23.	Annuities (A contract for a periodic payed No	ment of money to y	ou, either for life or for a numb	per of years)	
	Yes Issuer name and o	description.			
24.	. Interests in an education IRA, in an ac 26 U.S.C. §§ 530(b)(1), 529A(b), and 529		ed ABLE program, or under a	a qualified state tuition	program.
	■ No □ Yes Institution name an	nd description. Sep	parately file the records of any	interests.11 U.S.C. § 52°	(c):
25.	. Trusts, equitable or future interests in ■ No	n property (other t	than anything listed in line 1), and rights or powers	exercisable for your benefit
	☐ Yes. Give specific information about t	hem			
26.	 Patents, copyrights, trademarks, trade Examples: Internet domain names, web ■ No 	,		ements	
	☐ Yes. Give specific information about t	hem			
27.	 Licenses, franchises, and other general Examples: Building permits, exclusive line No 		e association holdings, liquor	licenses, professional lic	enses
	☐ Yes. Give specific information about t	hem			
M	oney or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
					oranno or oxomptions.

Official Form 106A/B Schedule A/B: Property page 4

Del	otor 1	Douglas Filardo	Case number (if known)	
_	Tax ref ■ No	funds owed to you		
		Give specific information about them, including whet	ther you already filed the returns and the tax years	
29.		support oles: Past due or lump sum alimony, spousal support	t, child support, maintenance, divorce settlement, property :	settlement
	■ No □ Yes.	Give specific information		
		amounts someone owes you bles: Unpaid wages, disability insurance payments, d benefits; unpaid loans you made to someone el	lisability benefits, sick pay, vacation pay, workers' compen lse	sation, Social Security
_	_	Give specific information		
[<i>Examp</i> ⊐ No		gs account (HSA); credit, homeowner's, or renter's insuran	ce
	Yes.	Name the insurance company of each policy and list Company name:	t its value. Beneficiary:	Surrender or refund value:
		Prudential Term	Spouse	\$0.00
ı	Examp ■ No	s against third parties, whether or not you have fil poles: Accidents, employment disputes, insurance claid		
34.	Other of		re, including counterclaims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim		
35.		nancial assets you did not already list		
		Give specific information		
36.		the dollar value of all of your entries from Part 4, i art 4. Write that number here	including any entries for pages you have attached	\$520.00
Par	t 5: De	scribe Any Business-Related Property You Own or Have	e an Interest In. List any real estate in Part 1.	
_		own or have any legal or equitable interest in any busine to Part 6.	ess-related property?	
	Yes. G	Go to line 38.		
Par		scribe Any Farm- and Commercial Fishing-Related Prop rou own or have an interest in farmland, list it in Part 1.	perty You Own or Have an Interest In.	
46.	_ `	own or have any legal or equitable interest in an	ny farm- or commercial fishing-related property?	
	_	Go to Part 7. Go to line 47.		

Official Form 106A/B Schedule A/B: Property page 5

Part	7: Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
			L	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$815,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		·
57.	Part 3: Total personal and household items, line 15	\$7,350.00		
58.	Part 4: Total financial assets, line 36	\$520.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,870.00	Copy personal property total	al \$7,870.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$822,870.00

Debtor 1

Douglas Filardo

Case number (if known)

Debtor 1	Douglas Filardo			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				☐ Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt								
1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.										
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	27 Montauk Highway Westhampton, NY 11977 Suffolk County	\$815,000.00	\$179,975.00		NYCPLR § 5206					
	Debtor's Residence Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	Household goods and furnishings Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00	NYCPLR § 5205(a)(5)					
	Ellie Holli Genedale Av.B. G.1			100% of fair market value, up to any applicable statutory limit						
	Electronics, cellphone and lpad	\$1,500.00		\$1,500.00	NYCPLR § 5205(a)(5)					

\$1,250.00

\$2,000.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$1,250.00

\$2,000.00

NYCPLR § 5205(a)(5)

NYCPLR § 5205(a)(6)

Line from Schedule A/B: 7.1

Line from Schedule A/B: 11.1

Jewelry - watches (2)

Line from Schedule A/B: 12.1

Wearing apparel

Dept	or 1	Douglas Filardo	Case number (if known)
	•	vou claiming a homestead exemption of more than \$189,050? ect to adjustment on 4/01/25 and every 3 years after that for cases filed on or	r after the date of adjustment.)
I		No	
I		Yes. Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?
		□ No	
		Π Yes	

		r case:			
Debtor 1	Douglas Filardo				
Debtor 2	FIRST Name	Middle Name Last Name			
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT OF NEW YORK			
0					
Case number _ (if known)				☐ Check	if this is an
				_	ded filing
					-
Official Forn	<u>n 106D</u>				
Schedule	D: Creditors	Who Have Claims Secured	by Propert	У	12/15
	e Additional Page, fill it o	If two married people are filing together, both are eq out, number the entries, and attach it to this form. On			
1. Do any creditors	have claims secured by	your property?			
☐ No. Chec	k this box and submit th	nis form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in	n all of the information	below.			
Part 1: List A	II Secured Claims				
2. List all secured	claims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
					Coldillii
	nore than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	nore than one creditor has list the claims in alphabetion	a particular claim, list the other creditors in Part 2. As			Unsecured
2.1 Andrea A Creditor's Nam	nore than one creditor has list the claims in alphabeti Ilani e	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County	Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S	nore than one creditor has list the claims in alphabeti Ilani e	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that	Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
2.1 Andrea A Creditor's Nam 396 3rd S Apt 14	nore than one creditor has list the claims in alphabeti Ilani e	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply.	Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn	nore than one creditor has list the claims in alphabeti Illani e	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent	Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn	nore than one creditor has list the claims in alphabetic llani	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply.	Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn	nore than one creditor has list the claims in alphabetic llani e treet , NY 11215 t, City, State & Zip Code	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn Number, Stree	nore than one creditor has list the claims in alphabetic llani e treet , NY 11215 t, City, State & Zip Code	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Do not deduct the value of collateral. \$150,000.00	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn Number, Stree Who owes the de	nore than one creditor has list the claims in alphabetic llani e treet , NY 11215 t, City, State & Zip Code	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	Do not deduct the value of collateral. \$150,000.00	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn Number, Stree Who owes the de Debtor 1 only	nore than one creditor has list the claims in alphabetic llani re itreet , NY 11215 t, City, State & Zip Code ebt? Check one.	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec	Do not deduct the value of collateral. \$150,000.00	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn Number, Stree Who owes the de Debtor 1 only Debtor 2 only Debtor 1 and D	nore than one creditor has list the claims in alphabetic llani re itreet , NY 11215 t, City, State & Zip Code ebt? Check one.	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	Do not deduct the value of collateral. \$150,000.00	that supports this claim	Unsecured portion If any
much as possible, 2.1 Andrea A Creditor's Nam 396 3rd S Apt 14 Brooklyn Number, Stree Who owes the de Debtor 1 only Debtor 2 only Debtor 1 and D	Ilani e Itreet , NY 11215 t, City, State & Zip Code ebtr? Check one.	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 27 Montauk Highway Westhampton, NY 11977 Suffolk County Debtor's Residence As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)	Do not deduct the value of collateral. \$150,000.00	that supports this claim	Unsecured portion If any

Debtor 1 Douglas Filardo		Case number (if known)							
First Name Middle N	ame Last Name								
2.2 PHH Mortgage Services	Describe the property that secures the claim:	\$372,238.00	\$815,000.00	\$0.00					
Creditor's Name	27 Montauk Highway Westhampton,								
	NY 11977 Suffolk County								
1 Mortgage Way	Debtor's Residence								
Mail Stop: SVCF	As of the date you file, the claim is: Check all that apply.	at							
Mount Laurel, NJ 08054	□ Contingent								
Number, Street, City, State & Zip Code	Unliquidated								
, с, с,, с с,	☐ Disputed	_ '							
Who owes the debt? Check one.	Nature of lien. Check all that apply.								
Debtor 1 only	■ An agreement you made (such as mortgage of	ur a a a u ura d							
Debtor 2 only	car loan)	ii secured							
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)							
At least one of the debtors and another	☐ Judgment lien from a lawsuit	,							
☐ Check if this claim relates to a community debt	Other (including a right to offset) Reverse	e Mortgage							
Date debt was incurred	Last 4 digits of account number 34	13							
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$522,238.	00						
If this is the last page of your form, add	the dollar value totals from all pages.	\$522,238.							
Write that number here:		4022,200.							
Part 2: List Others to Be Notified for	or a Debt That You Already Listed								
trying to collect from you for a debt you o	be notified about your bankruptcy for a debt that be to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors his page.	nd then list the collection ager	ncy here. Similarly, if you h	ave more					
[]									
[] Name, Number, Street, City, State &	& Zip Code On	which line in Part 1 did you ente	r the creditor? 2.2						
CompuLink Corporation		,							
dba Celink		st 4 digits of account number							
101 West Louis Henna Blv	⁄a								
Suite 450									
Austin, TX 78728									

Ħ	I in this inform	ation to identify your o	case:								
	ebtor 1	Douglas Filardo	34001								
D(DIOI I	First Name	Middle Na	ame	Last Name						
	ebtor 2	First Name	Middle Nie		Loot Nove						
(Sp	ouse if, filing)	First Name	Middle Na	ame	Last Name	3					
Ur	nited States Ban	kruptcy Court for the:	EASTERN D	DISTRICT OF NEW Y	/ORK						
	ase number			_					Check	if this is ar	1
								_	amend	led filing	
∩f	ficial Form	106E/E									
_		/F: Creditors W	ho Have	Unsecured C	:laim	e				12/1	5
		accurate as possible. Us					or creditors with NC	NPRIORITY (laims. Li		
Sch Sch left. nan	nedule G: Execute nedule D: Credito . Attach the Cont ne and case num	, ,	ired Leases (Of ured by Properi e. If you have r	ficial Form 106G). Do ty. If more space is ned to information to repor	not inclueded, co	ide any cre	editors with partially t you need, fill it out	secured clai , number the	ms that a entries ir	re listed in n the boxes	on the
		of Your PRIORITY Un									
١.	No. Go to Pa	rs have priority unsecured	u ciaims agains	st your							
	Yes.	art 2.									
2.	List all of your identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pa	s both priority and a coording to the	nd nonpriority amounts, ne creditor's name. If you	list that out of the control of the	claim here a	and show both priority	and nonpriori	ty amount	ts. As much	as
		tion of each type of claim, s				booklet.)					
							Total claim	Priority amount		Nonpriori amount	ty
2.1		Revenue Service ditor's Name	La	st 4 digits of account	number	6084	\$8,000.0		00.00	-	\$0.00
	625 Fult	otech Center on Street	W	hen was the debt incu	rred?	2022		_			
		n, NY 11201 reet City State Zip Code	As	of the date you file, the	he claim	is: Check a	all that apply				
		the debt? Check one.	_	Contingent							
	■ Debtor 1 or	nly		Unliquidated							
	Debtor 2 or	nly		Disputed							
	Debtor 1 ar	nd Debtor 2 only	Ту	pe of PRIORITY unsec	cured cla	ıim:					
	_	e of the debtors and anothe	er 🗆	Domestic support oblig	gations						
	☐ Check if th	nis claim is for a commun	nity debt	Taxes and certain other	er debts y	ou owe the	government				
	Is the claim su	ubject to offset?		Claims for death or per	rsonal inj	ury while yo	ou were intoxicated				
	■ No			Other. Specify							
	☐ Yes			Inco	me Ta	xes					
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecured	Claims							
3.	Do any creditor	rs have nonpriority unsec	ured claims ag	ainst you?							
	☐ No. You have	e nothing to report in this pa	art. Submit this f	orm to the court with yo	ur other	schedules.					
	Yes.										
4.	unsecured claim	nonpriority unsecured cla n, list the creditor separately or holds a particular claim, li	for each claim.	For each claim listed, ic	dentify wh	nat type of c	claim it is. Do not list	claims already	included i	in Part 1. If	
	. art Z.								Tota	al claim	

Debtor	1 Douglas Filardo	Case number (if known)						
4.1	Amex Nonpriority Creditor's Name	Last 4 digits of account number	4963	\$19,306.00				
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 11/07 Last Active 9/29/21					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed						
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin						
	Yes	Other. Specify Credit Card						
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number	2169	\$299.00				
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 04/16 Last Active 9/23/21					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated ☐ Disputed						
	☐ Debtor 1 and Debtor 2 only							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other Specify Credit Card	<u> </u>					
4.3	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	6270	\$12,831.00				
	Attn: Bankruptcy PO Box 8801	When was the debt incurred?	Opened 10/14 Last Active 09/21					
	Wilmington, DE 19899 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim						
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated ■ Disputed						
	Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	■ Other. Specify Credit Card	<u> </u>					

Debtor	1 Douglas Filardo	Case number (if known)			
4.4	Bashian & Papantoniou, PC Nonpriority Creditor's Name	Last 4 digits of account number		\$27,000.00	
	500 Old Country Road Suite 302	When was the debt incurred?	2017-2021		
	Garden City, NY 11530 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	■ Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharing	aration agreement or divorce that you did not ng plans, and other similar debts		
	Yes	Other. Specify Legal Fees			
4.5	Chase Card Services	Last 4 digits of account number	3057	\$1,759.00	
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 08/07 Last Active 05/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecure Student loans	d claim:		
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir			
	□Yes				
4.6	Chase Card Services	Last 4 digits of account number	7627	\$618.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 03/15 Last Active 09/21		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only				
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ■ Disputed Type of NONPRIORITY unsecure ☐ Student loans	d claim:		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Credit Card			

Debtor	Douglas Filardo	Case number (if known)					
4.7	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	0252	\$5,249.00			
	Citicorp Cr Srvs/ Centralized Bankruptcy Po Box 790040 St Louis, MO 63179	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.8	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	5188	\$7,468.00			
	Citicorp Credit Srvs Centralized Bk Dept PO Box 790034	When was the debt incurred?	Opened 09/14 Last Active 8/28/21				
	Saint Louis, MO 63179 Number Street City State Zip Code	As of the date you file the claim i					
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	■ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.9	Citibank	Last 4 digits of account number	7450	\$5,558.00			
	Nonpriority Creditor's Name Citicorp Credit Srvs Po Box 790034 Saint Louis, MO 63179	When was the debt incurred?	Opened 03/11 Last Active 9/16/21				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	Other. Specify Credit Card	<u> </u>				

Debtor	1 Douglas Filardo		Case number (if known)			
4.1	Citibank/The Home Depot	Last 4 digits of account number	9280	\$1,319.00		
	Nonpriority Creditor's Name Citicorp Credit Srvs Po Box 790034 Scient Lawie MO 62470	When was the debt incurred?	Opened 11/07 Last Active 9/23/21			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharin				
	Yes	Other. Specify Charge Acc	count			
4.1	Citibankna	Last 4 digits of account number	1431	\$3,826.00		
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized BK Dept Po Box 790034	When was the debt incurred?	Opened 05/18 Last Active 10/18/21			
	St. Louis, MO 63179 Number Street City State Zip Code	As of the date you file the claim i	ou file, the claim is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	a plane, and other similar debts			
	☐ Yes	Other. Specify Unsecured				
4.1 2	Comenity Bank/Wayfair Nonpriority Creditor's Name	Last 4 digits of account number	4442	\$206.00		
	Attn: Bankruptcy PO Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 01/19 Last Active 09/21			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Charge Acc	counbt			

Debto	or 1 Douglas Filardo	Case number (if known)			
4.1	Discover Financial	Last 4 digits of account number	2718	\$1,698.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 06/13 Last Active 09/21 s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Credit Card			
4.1	Dsnb Bloomingdales Nonpriority Creditor's Name	Last 4 digits of account number	8611	\$250.00	
	Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040	When was the debt incurred?	Opened 01/21 Last Active 09/21		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Charge Acc	count		
4.1 5	Internal Revenue Service	Last 4 digits of account number	6084	\$12,000.00	
	Nonpriority Creditor's Name 10 Metrotech Center 625 Fulton Street	When was the debt incurred?			
	Brooklyn, NY 11201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	\square Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	No	□ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	■ Other, Specify Income Tax	してつ		

Debtor 1 Douglas Filardo		Case number (if known)					
4.1	Lincoln Auto Finance	Last 4 digits of account number	8108	\$3,000.00			
	Nonpriority Creditor's Name PO Box 62000 Colored Springs CO 80063	When was the debt incurred?					
	Colorado Springs, CO 80962 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	-	,				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing	•				
	Yes	Other. Specify Consumer	Purchases				
4.1							
4.1 7	LVNV Funding LLC	Last 4 digits of account number		\$207.27			
	Nonpriority Creditor's Name Resurgent CapitalServices	When was the debt incurred?	12/1/2021				
	PO Box 10587						
	Greenville, SC 29603-0587 Number Street City State Zip Code						
	Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only						
	_						
	Debtor 2 only	☐ Unliquidated☐ Disputed					
	Debtor 1 and Debtor 2 only	d claim:					
	At least one of the debtors and another	Children land					
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not				
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	■ Other. Specify Telecom					
4.1 8	Nordstrom FSB Nonpriority Creditor's Name	Last 4 digits of account number	4539	\$181.00			
	Attn: Bankruptcy Po Box 6555	When was the debt incurred?	Opened 12/01/13 Last Active 9/23/21				
	Englewood, CO 80155 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	•					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	es					

Debtor 1 Douglas Filardo		Case number (if known)					
4.1	NYS Dept of Taxation	Last 4 digits of account number	6084	\$10,112.82			
	Nonpriority Creditor's Name and Finance WA Harriman Campus	When was the debt incurred?					
	Albany, NY 12227 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify Income Tax	ces				
4.2	Star Auto Sales of Queens	Last 4 digits of account number	4317	\$4,000,000.00			
	Nonpriority Creditor's Name c/o Milman Labuda Law	When was the debt incurred?	2017				
	Group PLLC 3000 Marcus Ave, Ste 3W8 New Hyde Park, NY 11042						
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	Debtor 1 only						
	Debtor 2 only	■ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	. Disputou					
	At least one of the debtors and another						
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	·	Debts to pension or profit-sharing plans, and other similar debts				
	Yes		ction 0717443/2017 - Queens usiness Debt				
4.2	Truist Bank	Last 4 digits of account number	4142	\$16,888.00			
Γ	Nonpriority Creditor's Name	Last 4 digits of account number		ψ.ιο,οοο.οο			
	Attn: Bankruptcy		Opened 7/26/18 Last Active				
	Mail Code	When was the debt incurred?	9/27/21				
	VA-RVW-6290 POB 85092 Richmond, VA 23286						
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	□ Yes	Other Specify Unsecured					

Debtor 1	Douglas Filardo	Case number (if known)
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Part 3:	List Others to Be Notified About a Debt That You Already	l istad
raits.	LIST OTHERS TO BE NOTHIEU ADOUT a DEDITINGT TOU AIREAUY	LISIEU

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **American Express** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **National Bank** ■ Part 2: Creditors with Nonpriority Unsecured Claims c/o Becket and Lee LLP PO Box 3001 Malvern, PA 19355-0701 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Amex/Bankruptcy Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 679 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Barclays Bank Delaware** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 8803 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19899 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Berger Fischoff Shumer Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Wexler & Goodman LLP Part 2: Creditors with Nonpriority Unsecured Claims

6901 Jericho Turnpike Suite 230 Syosset, NY 11791		- Part 2. Creditors with Nonphority Onsecured Claims
-	Last 4 digits of account number	
Name and Address		2 did you list the original creditor?
Cbna	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Po Box 6181 Sioux Falls, SD 57117		Part 2: Creditors with Nonpriority Unsecured Claims
oloux I alis, ob 37 I I I	Last 4 digits of account number	
Name and Address		2 did you list the original creditor?
Chase Card Services	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 15369 Wilmington, DE 19850		Part 2: Creditors with Nonpriority Unsecured Claims
Willington, DL 13000	Last 4 digits of account number	
Name and Address	•	2 did you list the original creditor?
Citibank	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 6217 Sioux Falls, SD 57117		Part 2: Creditors with Nonpriority Unsecured Claims
0.00x 1 a0, 0.5 0.7 1.7	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
Citibank/The Home Depot	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 6497 Sioux Falls, SD 57117		Part 2: Creditors with Nonpriority Unsecured Claims
oloux I alis, ob 37 I I I	Last 4 digits of account number	
Name and Address	•	2 did you list the original creditor?
Comenity Bank/Wayfair PO Box 182789	Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Columbus, OH 43218		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address		2 did you list the original creditor?
Discover Braducts Inc.	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Discover Products Inc PO Box 3025		■ Part 2: Creditors with Nonpriority Unsecured Claims
New Albany, OH 43054-3025		

Debtor 1 Douglas Filardo		Case number (if known)
Name and Address Discover Financial Pob 15316 Wilmington, DE 19850	On which entry in Part 1 or Part 2 did y Line 4.13 of (Check one):	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Dsnb Bloomingdales Po Box 6789 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.14 of (Check one): Last 4 digits of account number	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Timadolphia, FX ToToT To-To	Last 4 digits of account number	
Name and Address JPMorgan Chase Bank NA sbmt Chase Bank USA NA c/o National Bankruptcy PO Box 9013 Addison, TX 75001	On which entry in Part 1 or Part 2 did y Line 4.6 of (Check one):	rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Light Stream 600 W Broadway Suite 2000	On which entry in Part 1 or Part 2 did y Line 4.21 of (Check one):	rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
San Diego, CA 92101	Last 4 digits of account number	
Name and Address LightStream/Suntrust Bank Truist Bank PO Box 1847 Wilson, NC 27894	On which entry in Part 1 or Part 2 did y Line 4.21 of (Check one):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	
Name and Address Lincol Auto Finance PO Box 55000 Dept 194101 Detroit, MI 48255-1941	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address LVNV Funding LLC Resurgent CapitalServices PO Box 10587 Greenville, SC 29603-0587	On which entry in Part 1 or Part 2 did y Line 4.8 of (Check one):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Nordstrom FSB 13531 E Caley Ave Englewood, CO 80111	On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): Last 4 digits of account number	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address NYS Department of Taxation & Finance Bankruptcy Section PO Box 5300 Albany, NY 12205-0300	On which entry in Part 1 or Part 2 did y Line 4.19 of (<i>Check one</i>):	rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
y •	Last 4 digits of account number	

Debtor 1 D	ouglas l	Filardo		Case nu	mber (if I	known)		
Name and Add Portfolio R Associates c/o Barclay POB 41067	Recovery s LLC ys Bank 7		On which entry in Part 1 or Part 2 did you Line 4.3 of (Check one):	☐ Part 1: 0	Creditors v	ditor? with Priority Unsecu with Nonpriority Un		i
Norfolk, V	A 23541		Last 4 digits of account number					
Name and Ado Quantum3 PO Box 78 Kirkland, V	Group 88		On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	☐ Part 1: 0	Creditors v	ditor? with Priority Unsect with Nonpriority Un		
			Last 4 digits of account number					
Name and Add Selip & Sty PO Box 90 199 Cross Woodbury	ylianou, 104 ways Pa	rk Drive	On which entry in Part 1 or Part 2 did you Line 4.21 of (Check one):	☐ Part 1: 0	Creditors v	ditor? with Priority Unsect with Nonpriority Un		;
			Last 4 digits of account number					
Name and Add Star Auto S 206-26 Nor Bayside, N	Sales of rthern B	lvd	On which entry in Part 1 or Part 2 did you Line 4.20 of (Check one):	☐ Part 1: 0	Creditors v	ditor? with Priority Unsect with Nonpriority Un		;
zayo.ao,			Last 4 digits of account number					
Name and Add Suntrust E Attn: Bank MC Va-Rvv Pob 85092	Bank kruptcy w_6290		On which entry in Part 1 or Part 2 did you Line 4.21 of (Check one):	☐ Part 1: 0	Creditors v	ditor? with Priority Unsect with Nonpriority Un		;
Richmond	, VA 232	860	Last 4 digits of account number					
Name and Add Suntrust E 303 Peach Northeast Atlanta, G	Bank tree Stre	eet	On which entry in Part 1 or Part 2 did you Line 4.21 of (Check one):	☐ Part 1: 0	Creditors v	ditor? with Priority Unsecu with Nonpriority Un		;
Atlanta, O	A 30300		Last 4 digits of account number					
Name and Add Truist Ban 40 Northw Suite C	k	vd	On which entry in Part 1 or Part 2 did you Line 4.21 of (Check one):	Part 1: 0	Creditors v	ditor? with Priority Unsect with Nonpriority Un		,
Columbus	, OH 432	235	Last 4 digits of account number					
	mounts of		Insecured Claim aims. This information is for statistica	I reporting	purposes	s only. 28 U.S.C. §	159. Add the a	mounts for each
	0-	Damastia amasant ablimatian		0-		Total Claim		
Total claims	6a.	Domestic support obligation		6a.	\$		0.00	
from Part 1	6b. 6c.	Taxes and certain other deb Claims for death or persona	ts you owe the government I injury while you were intoxicated	6b. 6c.	\$ — \$	8,0	0.00	
	6d.		secured claims. Write that amount here.		\$		0.00	
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	8,0	000.00	
	24	Otendand In the		24		Total Claim	2.55	
Total claims from Part 2	6f. 6g.	Student loans Obligations arising out of a	separation agreement or divorce that	6f. 6g.	\$ \$		0.00	
	- 3-	J		_				

Debtor 1 Douglas Filardo

Case number (if known)

- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

		0.00
6h.	\$	0.00
6i.	•	4.129.776.09

6j. \$ **4,129,776.09**

Fill in this inform	mation to identify your	case:		
Debtor 1	Douglas Filardo			
	First Name	Middle Name	Last Name	I
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Lincoln Automotive Fin
Attn: Bankrutcy
Po Box 54200
Omaha, NE 68154

State what the contract or lease is for
Acct# xxxx9141
Opened 11/20
Lease

Fill in t	his information to identify y	our case:		
Debtor	1 Douglas Filar	do		
	First Name	Middle Name	Last Name	
Debtor : (Spouse if		Middle Name	Last Name	
	States Bankruptcy Court for the			
Offica (otates Barikraptoy Court for the	ENOTERIA DIOTRIOTO	THEW FORK	
Case nu				☐ Check if this is an
(amended filing
Offic	ial Form 1064			
	ial Form 106H	- d - h		
Scne	edule H: Your C	odeptors		12/15
people a	are filing together, both are t, and number the entries in	equally responsible for supp	lying correct information. If the Additional Page to this	nplete and accurate as possible. If two married find from the space is needed, copy the Additional Page, page. On the top of any Additional Pages, write
1. [Do you have any codebtors	? (If you are filing a joint case, o	lo not list either spouse as a	codebtor.
□ 1	No			
	Yes			
2 V	Nithin the last 8 years, have	you lived in a community pro	onerty state or territory? (C	community property states and territories include
		ana, Nevada, New Mexico, Pue		
.	No. Go to line 3.			
		spouse, or legal equivalent live	with you at the time?	
_	roc. Dia your opouco, formor	opouco, or logal oquivalent live	man you at the time.	
in I For	ine 2 again as a codebtor o	nly if that person is a guarant	or or cosigner. Make sure	ur spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Official Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State			Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	, , , , , , , , , , , , , , , , , , , ,			Shook all dorloadios that apply.
3.1	Francine Filardo			.
5.1	27 Montauk Highway			■ Schedule D, line 2.2 □ Schedule E/F, line
	Westhampton, NY 119	77-1211		Schedule G
				PHH Mortgage Services
3.2	Francine Filardo			Schedule D, line 2.1
	27 Montauk Highway Westhampton, NY 119	77-1211		☐ Schedule E/F, line
	Westilanipton, NT 113	777-1211		Schedule G
			A	Andrea Allani
3.3	Francine Filardo		Г	Schedule D, line
	27 Montauk Highway			■ Schedule E/F, line 4.20
	Westhampton, NY 119	77-1211		Schedule G
				Star Auto Sales of Ougens

	in this information to identify yo													
Deb	otor 1 Douglas	Filardo				_								
	otor 2					_								
Unit	ted States Bankruptcy Court for	r the: EASTERN DISTRICT	OF NEW	YORK		_								
Case number (If known)							Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:							
<u>O</u>	ficial Form 106l						Ī	MM / DD/ Y	YYYY					
Sc	chedule I: Your Ir	ncome									12/15			
supp spot	s complete and accurate as polying correct information. If use. If you are separated and the a separate sheet to this for Describe Employment	you are married and not fili your spouse is not filing w rm. On the top of any additi	ng jointly ith you, d	, and your spoon onot include	ouse i infori	s liv natio	ing with on abou	you, incl t your spe	ude info ouse. If r	rmation about nore space is i	your needed,			
1.	Fill in your employment information.		Debtor	1				Debtor 2	2 or non	-filing spouse				
	If you have more than one job	Employment status	■ Emp	■ Employed				■ Employed						
	attach a separate page with information about additional	Employment status	☐ Not	☐ Not employed					☐ Not employed					
	employers.	Occupation	Auto Sales/Repair					Healthcare Aide/Auto Broker						
	Include part-time, seasonal, o self-employed work.	Employer's name												
	Occupation may include stude or homemaker, if it applies.	ent Employer's address												
		How long employed t	here?	2 Years					S Years					
Par	t 2: Give Details About	Monthly Income												
	mate monthly income as of the unless you are separated.	ne date you file this form. If	you have	nothing to repo	ort for	any l	ine, writ	e \$0 in the	space. I	nclude your nor	n-filing			
•	u or your non-filing spouse have space, attach a separate shee		ombine the	e information fo	or all e	emplo	oyers for	that perso	on on the	lines below. If y	ou need			
							For De	btor 1		ebtor 2 or iling spouse				
2.	List monthly gross wages, sideductions). If not paid month				2.	\$		0.00	\$	0.00				
3.	Estimate and list monthly o	vertime pay.			3.	+\$		0.00	+\$_	0.00				
4.	Calculate gross Income. Ad	dd line 2 + line 3.			4.	\$		0.00	\$	0.00				

Deb	tor 1	Douglas Filardo	_	(Case nu	mber (if kn	own)			
						ebtor 1			For Debtor		
	Cop	py line 4 here	4.		\$	0	.00);	\$	0.00	_
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	0	.00	,	\$	0.00	
	5b.		5b.		\$.00	_	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$.00		\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$.00	_	\$	0.00	_
	5e.	Insurance	5e.		\$.00	_	\$	0.00	_
	5f.	Domestic support obligations	5f.		\$.00		\$	0.00	_
	5g.	Union dues	5g.		\$.00	_	\$	0.00	_
	5h.	Other deductions. Specify:	_	.+	\$			_	\$	0.00	_
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$	0	.00	_) :	\$	0.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$.00	_	\$ \$	0.00	_
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. 8d. 8e.		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0 0 2,757	00.00) :) :	\$ \$ \$ 51	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	<u> </u>	4,442	.00) :	\$	4,740.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,	442.00	+	\$	4,740.00	= \$	9,182.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L				L				
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	r depe					•	in <i>Schedul</i>	e J. +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The rete that amount on the Summary of Schedules and Statistical Summary of Certallies								\$	9,182.00
										Combi month	ned ly income

13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

Fill	in this information to identify your case:										
Deb	otor 1 Douglas Filardo		Check if this is:								
D-1			☐ An amended filing								
1	ouse, if filing)			A supplement snow 13 expenses as of t	ving postpetition chapter the following date:						
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO	ORK	MM / DD / YYYY								
Cas	e number										
	nown)										
\bigcirc	fficial Form 106J										
	chedule J: Your Expenses				12/15						
Be info nur	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.										
1.	t 1: Describe Your Household Is this a joint case?										
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?										
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househo	old of Debte	or 2.							
2.	Do you have dependents? ☐ No										
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?						
	Do not state the				□ No						
	dependents names.	Wife			■ Yes						
					□ No						
					□ Yes □ No						
					☐ Yes						
		-		-	□ No						
					☐ Yes						
3.	Do your expenses include expenses of people other than										
	yourself and your dependents?										
	t 2: Estimate Your Ongoing Monthly Expenses										
exp	imate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.	ou are using this for lemental <i>Schedule J</i>	m as a sup , check the	oplement in a Cha e box at the top of	pter 13 case to report f the form and fill in the						
Inc	lude expenses paid for with non-cash government assistance if	you know									
	value of such assistance and have included it on Schedule I: Ye ficial Form 106I.)	our Income		Your expe	enses						
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		0.00						
	If not included in line 4:										
	4a. Real estate taxes		4a. \$		466.00						
	4b. Property, homeowner's, or renter's insurance		4b. \$		234.00						
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		400.00						
E	4d. Homeowner's association or condominium dues	no oquity loons	4d. \$ 5. \$		0.00						
5.	Additional mortgage payments for your residence, such as hor	ne equity loans	э. ֆ		633.00						

Debtor 1	Douglas Filardo	Case num	ber (if known)	
i. Uti	lities:			
6a.		6a.	\$	550.00
6b.	•	6b.	\$	124.00
6c.		6c.	:	480.00
6d.		6d.	\$	68.00
	od and housekeeping supplies	7.	·	1,000.00
	ildcare and children's education costs	8.	\$	
			\$	0.00
	othing, laundry, and dry cleaning rsonal care products and services	9.	*	200.00
	•	10.	\$	150.00
	dical and dental expenses	11.	\$	75.00
	Insportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	400.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	aritable contributions and religious donations	14.	\$	
	•	14.	Φ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	470.00
	o. Health insurance	15a. 15b.	· -	547.00
		15b. 15c.	·	
	c. Vehicle insurance		\$	361.00
	d. Other insurance. Specify: Dental Insurance	15d.	\$	176.00
	kes. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	¢	4 050 00
	ecify: Taxes	16.	\$	1,350.00
	tallment or lease payments:	47-	c	F40.00
	a. Car payments for Vehicle 1	17a.	·	519.00
	o. Car payments for Vehicle 2	17b.	\$	373.00
	c. Other. Specify:	17c.	\$	0.00
	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report		¢.	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 10	6 I). 18.	·	
	ner payments you make to support others who do not live with you.		\$	400.00
	ecify: IRS Arrears	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on S			
	a. Mortgages on other property	20a.	·	0.00
20k	o. Real estate taxes	20b.	\$	0.00
200	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20€	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	ner: Specify:	21.	+\$	0.00
	· ,			
	Iculate your monthly expenses			
	a. Add lines 4 through 21.		\$	9,126.00
22t	 Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J 	-2	\$	
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	9,126.00
	·			-,
	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	9,182.00
23b	c. Copy your monthly expenses from line 22c above.	23b.	-\$	9,126.00
230	c. Subtract your monthly expenses from your monthly income.	00 -	œ.	56.00
	The result is your monthly net income.	23c.	\$	30.00
	you expect an increase or decrease in your expenses within the year after			ar daaraaa baaaaa '
	example, do you expect to finish paying for your car loan within the year or do you expect dification to the terms of your mortgage?	your mortgage	payment to increase	or decrease because of a
	, , ,			
	No.			
	Yes. Explain here:			

Fill in this in	nformation to identify your	case:			
Debtor 1	Douglas Filardo				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case numbe	ar.				
(if known)					☐ Check if this is an amended filing
Declar If two marrie You must file	orm 106Dec ation About a d people are filing together this form whenever you file property by fraud in	r, both are equally responders	nsible for supplying corre	ect information. Making a false statement,	
	h. 18 U.S.C. §§ 152, 1341, 1 Sign Below	515, and 5571.			
Did you	u pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Ye	es. Name of person				Petition Preparer's Notice, ignature (Official Form 119)
	enalty of perjury, I declare y are true and correct.	that I have read the sum	mary and schedules filed	l with this declaration and	
Y /a/	Douglas Filardo		Х		
	Douglas Filardo uglas Filardo		Signature of D	Debtor 2	
	nature of Debtor 1		Oignatare of L		
Date	e <u>May 10, 2023</u>		Date		

		nation to identify you	r case:			
Del	otor 1	Douglas Filardo First Name	Middle Name	Last Name		
1	otor 2					
(Spc	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
1	se number					Check if this is an mended filing
Sta Be a	as complete a	of Financial		are filing together, both are	ankruptcy equally responsible for sup	
		n). Answer every que		unis form. On the top of any	y additional pages, write you	in name and case
Par	t 1: Give D	Petails About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	is?			
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
the data way filed for bankers to			☐ Wages, commissions, bonuses, tips	\$10,589.00	☐ Wages, commissions, bonuses, tips	
■ Operating a business □ Operating a business						

Debtor 1 Douglas Filardo Cas					Case	e number (if known)			
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	s income re deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)
	r last calen nuary 1 to	idar year: December	31, 2022)	☐ Wages, commissions, bonuses, tips		\$16,764.00	☐ Wages, comr bonuses, tips	nissions,	
				Operating a business			Operating a b	usiness	
		dar year be December		☐ Wages, commissions, bonuses, tips		\$8,733.00	☐ Wages, common bonuses, tips	nissions,	
				Operating a business			☐ Operating a b	usiness	
	□ No	source and f		ome from each source separa Debtor 1			Debtor 2		
				Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Sources of inco	me	Gross income (before deductions and exclusions)
		y 1 of curre filed for bai	nt year until nkruptcy:	Social Security		\$14,000.00			
	r last caler nuary 1 to	dar year: December	31, 2022)	Social Security		\$47,960.00			
		dar year be December		Social Security		\$45,223.00			
Pai	rt 3: Lis	t Certain Pa	nyments You	Made Before You Filed for	Bankrup	otcy			
6.	Are eithe	Neither D	ebtor 1 nor [e's debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	umer de	bts. Consumer debts	are defined in 11 l	U.S.C. § 10	1(8) as "incurred by an
		□ No.	90 days before 90 days before 70 days	ore you filed for bankruptcy, c	did you pa	ay any creditor a total	of \$7,575* or more	∍?	
		☐ Yes	paid that cr	each creditor to whom you pa reditor. Do not include payme payments to an attorney for	ents for do	mestic support oblig			
		* Subject		t on 4/01/25 and every 3 yea			or after the date of	adjustment	
	Yes.			or both have primarily consore you filed for bankruptcy, co			of \$600 or more?		
		□ No.	Go to line 7	7.					
		■ Yes	include pay	each creditor to whom you pa rments for domestic support of r this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Ford Motor Credit Company LLC 17197 N Laurel Park Drive SUite 402 Livonia, MI 48152		\$519.00	\$0.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Andrea Allani 396 3rd Street Apt 14 Brooklyn, NY 11215		\$533.00	\$0.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
7.	Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	ortners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	rships of which yo securities; and ar	u are a general partner; corporation ny managing agent, including one f
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address		ments or transfer a Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in an			
	Case title Case number	Nature of the case	Court or agency		Status of the case
	Star Auto Sales of Queens LLC D/B/A Star Subaru vs Douglas Filardo and Subaru Motorsports d/b/a Motorsports Advertising 717443/2017	Money Due	Supreme Court of New York County of Quee		■ Pending □ On appeal □ Concluded
	Truist Bank, as successor by merger to SunTrust Bank dba Lightstream 605062/2023	Civil	Supreme Court State County of Suffo		■ Pending □ On appeal □ Concluded

Debtor 1 Douglas Filardo

	Case title Case number	Nature of the case	Court or agency	Status of th	ne case	
	Unknown Plaintiff vs Unknown Defendant 2171691REG	BankruptcyChapt er13	US BKPT CT NY WESTBURY	☐ On appe	□ Pending□ On appeal□ Concluded	
				Dismissed	d - 0.00	
	DOUGLAS FILARDO vs Unknown Defendant 2171691	Bankruptcy Chapter 13	NEW YORK EASTERN - CENTRALISLIP	☐ Pending ☐ On appe ☐ Conclud	eal led	
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, foreclosed,	garnished, attached	d, seized, or levied?	
	Creditor Name and Address	Describe the Property Explain what happened	1	Date	Value of the property	
 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any an accounts or refuse to make a payment because you owed a debt? ■ No □ Yes. Fill in the details. 					amounts from your	
	Creditor Name and Address	Date action was taken	Amount			
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an No Yes		erty in the possession of an a	ssignee for the bene	efit of creditors, a	
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts	s with a total value of more th	an \$600 per person	?	
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:	Describe the gifts		Dates you gave the gifts	Value	
14.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or cont		s or contributions with a total	I value of more than	\$600 to any charity?	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ı contributed	Dates you contributed	Value	

Debtor 1 Douglas Filardo

Debtor 1 Douglas Filardo			Case number (if known)					
Par	tt 6: List Certain Losses							
	Within 1 year before you filed for bar or gambling?	nkruptcy or	since you filed for bankruptcy, did yo	ou lose anyt	hing because of the	ft, fire, other disaster		
	■ No							
	Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loat the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: If	ist pending	Date of your loss	Value of property lost		
Par	t 7: List Certain Payments or Trans	sfers						
	Within 1 year before you filed for bar consulted about seeking bankruptcy Include any attorneys, bankruptcy petition	or preparir	ng a bankruptcy petition?			erty to anyone you		
	No Silling the date its							
	Yes. Fill in the details. Person Who Was Paid		Description and value of any prope	erty	Date payment	Amount of		
	Address Email or website address Person Who Made the Payment, if N	lot You	transferred		or transfer was made	payment		
	Phillips, Artura & Cox 165 South Wellwood Avenue Lindenhurst, NY 11757 Bankruptcy@pwqlaw.com		Attorney Fees of \$5,000		05/03/2023	\$5,000.00		
	Within 1 year before you filed for bar promised to help you deal with your Do not include any payment or transfer	creditors of	r to make payments to your creditors	behalf pay o s?	r transfer any prope	erty to anyone who		
	No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting include gifts and transfers that you have already listed on this statement. No								
	Yes. Fill in the details. Person Who Received Transfer Address		Description and value of property transferred	payments	any property or received or debts	Date transfer was made		
	Person's relationship to you			paid in exc	cnange			
19.	beneficiary? (These are often called a No		, , , , ,	elf-settled tru	ıst or similar device	of which you are a		
	Yes. Fill in the details. Name of trust		Description and value of the prese	rty transform	ad	Data Transfer was		
	Name of trust		Description and value of the prope	ity transferre	c u	Date Transfer was		

Debtor 1 **Douglas Filardo** Case number (if known)

Par	List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and St	orage Unit	s					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
	No									
	Yes. Fill in the details.									
		Last 4 digits of Type of account account instrument		unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, a	ny safe dep	oosit box or other deposit	ory for securities,				
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?				
22.	Have you stored property in a storage unit or p	place other than your	home within 1	year befor	e you filed for bankruptcy	/ ?				
	□ No									
	Yes. Fill in the details.									
	Name of Storage Facility	Who also has or h	Who else has or had access Desc		the contents	Do you still				
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)				have it?				
	Hampton Storage	Debtor and Spouse Furni		Furniture	9	□ No ■ Yes				
Par	tt 9: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that some for someone.	one else owns? Inclu	ude any proper	ty you bori	owed from, are storing fo	or, or hold in trust				
	■ No									
	Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value				
Par	tt 10: Give Details About Environmental Inform	,								
For	the purpose of Part 10, the following definitions	s apply:								
	Environmental law means any federal, state, or	r local statute or requ	ulation concern	ina polluti	on, contamination, releas	es of hazardous or				
	toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface	e water, ground	• .						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		environmental l	aw, wheth	er you now own, operate,	or utilize it or used				
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,									

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

page 6

24.	Has	as any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
		No								
	ш	Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous material?							
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any envi	iron	nmental law? Include settlements a	nd orders.				
		No Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case				
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business							
		_	-		f the following connections to any	husiness?				
21.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation									
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.									
		Yes. Check all that apply above and fill		s.						
	Bu	siness Name	Describe the nature of the business		Employer Identification number					
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security n	umber or ITIN.				
			·		Dates business existed					
28.	With inst	nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement t	to a	nyone about your business? Includ	de all financial				
		No Yes. Fill in the details below.								
		me dress nber, Street, City, State and ZIP Code)	Date Issued							
	•	<u>.</u>								

Debto	r1 Douglas Filardo	Case number (if known)
Part 1	2: Sign Below	
ı artı	Zi Olgii Below	
		at of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers
		aking a false statement, concealing property, or obtaining money or property by fraud in connection
		s up to \$250,000, or imprisonment for up to 20 years, or both.
10 U.S	.C. §§ 152, 1341, 1519, and 3571.	
/s/ Do	ouglas Filardo	
Douc	ılas Filardo	Signature of Debtor 2
Signa	ture of Debtor 1	
Date	May 10, 2023	Date
Did yo	u attach additional pages to Your	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did yo	u pay or agree to pay someone wh	o is not an attorney to help you fill out bankruptcy forms?
No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

	mation to identify yo			
Debtor 1	Douglas Filard	Middle Name	Last Name	
Debtor 2	i ii st i vaine	Wildle Wallie	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for th	e: EASTERN DISTRICT O	F NEW YORK	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		ion for Individu	ıals Filing Unde	r Chapter 7
If you are an ind	lividual filing under	chapter 7, you must fill out t	his form if:	
creditors have	e claims secured by	your property, or		
You must file th	is form with the cou ever is earlier, unles		le your bankruptcy petition o	r by the date set for the meeting of creditors, nd copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	_
Description of	Retain the property and enter into a	☐ Yes
property	Reaffirmation Agreement.	
securing debt:	☐ Retain the property and [explain]:	
securing debt.		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Debtor 1 Douglas Filardo		Filardo	Case number (if known)			
name: Description of property securing debt:			 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes		
For in th	any un ne infor	expired per mation belo	ow. Do not list real estate leas	eases I listed in Schedule G: Executory Contracts and Uises. Unexpired leases are leases that are still in effease if the trustee does not assume it. 11 U.S.C. §	fect; the lease period has not yet ended.	
Des	scribe y	our unexp	ired personal property leases		Will the lease be assumed?	
Lessor's n		ame:	Lincoln Automotive Fin		□ No	
					■ Yes	
Description of leased Property:		n of leased	Acct# xxxx9141 Opened 11/20 Lease			
Par	t 3:	Sign Below				
			ury, I declare that I have indica ct to an unexpired lease.	ated my intention about any property of my estate	that secures a debt and any personal	
Χ	/s/ Douglas Filardo		ardo	x		
	Douglas Filard Signature of Debt			Signature of Debtor 2		
	Date	May 1	0, 2023	Date		

Fill i	n this information to identify your case:						irected	in this form and	l in Form
Deb	or 1 Douglas Filardo			12	2A-1Su	pp:			
Deb	or 2				.				
	se, if filing)					nere is no presi			
	ed States Bankruptcy Court for the: Eastern District of	f New \	York		а		nade ur	mine if a presun nder <i>Chapter 7 I</i> rm 122A-2)	•
(if kno	e number wn)					`		ot apply now be	ocause of
								e but it could ap	
					□ Che	eck if this is a	n ame	nded filing	
Off	icial Form 122A - 1							_	
	apter 7 Statement of Your Cu	rren	nt Monthl	y Inc	ome	9			12/19
attacl case	complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to number (if known). If you believe that you are exempted frying military service, complete and file Statement of Exem 1: Calculate Your Current Monthly Income	which to	he additional info esumption of abu	rmation a	ipplies. se you (On the top of ar	ny addit narily co	ional pages, writ onsumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one of	nly.							
	☐ Not married . Fill out Column A, lines 2-11.								
	$\hfill\square$ Married and your spouse is filing with you. Fill α	out both	Columns A and	B, lines	2-11.				
	■ Married and your spouse is NOT filing with you	. You a	nd your spous	e are:					
	Living in the same household and are not leg	ally se	parated. Fill out	both Co	lumns /	A and B, lines 2	2-11.		
	☐ Living separately or are legally separated. Fil							ng this box, you	ı declare under
	penalty of perjury that you and your spouse are living apart for reasons that do not include evad							at you and your	spouse are
Fi	Il in the average monthly income that you received from a		•			•	, ,	nkruptcy case. 1	I1 U.S.C. §
10	1(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tot	month pe	eriod would be Ma	rch 1 thro	ıgh Aug	ust 31. If the amo	unt of yo	our monthly incom	ne varied during
	ouses own the same rental property, put the income from that								
					Colum			mn B	
					Debto	r 1		or 2 or filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime	, and c	ommissions (be	efore all	¢.	0.00	•	0.00	
,	payroll deductions).		anto from a once	ioo if	\$	0.00	\$	0.00	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e paym	ients from a spot	use II	\$	0.00	\$	0.00	
4.	All amounts from any source which are regularly								
	of you or your dependents, including child suppor from an unmarried partner, members of your househo								
	and roommates. Include regular contributions from a s	pouse	only if Column B	is not	\$	0.00	\$	0.00	
5.	filled in. Do not include payments you listed on line 3. Net income from operating a business, profession	or far	·m		Ψ		Ψ		
J.	Debtor 1	, or rai	Debtor 2						
	Gross receipts (before all deductions) \$ 1,685.00	\$	3,482.00						
	Ordinary and necessary operating expenses -\$ 0.00	-\$	0.00						
	Net monthly income from a business, profession, or farm \$ 1,685.00	\$	3,482.00	Copy here ->	\$	1,685.00	\$	3,482.00	
6.	Net income from rental and other real property								
		•	Debtor 1						
	Gross receipts (before all deductions)	\$ -\$	0.00						
	Ordinary and necessary operating expenses Net monthly income from rental or other real property	-» - \$	0.00 Copy	here ->	\$	0.00	\$	0.00	
-	, , ,	Φ_			\$	0.00	\$	0.00	
7.	Interest, dividends, and royalties				Ψ			5.55	

Debto	Douglas Filardo		Case numbe	r (if known)			
			Column A Debtor 1		Column B Debtor 2 c		
8.	Unemployment compensation		\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefithe Social Security Act. Instead, list it here:						
		00					
•		00					
9.	Pension or retirement income. Do not include any amount received that wa benefit under the Social Security Act. Also, except as stated in the next senter not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injuridisability, or death of a member of the uniformed services. If you received any pay paid under chapter 61 of title 10, then include that pay only to the extent the does not exceed the amount of retired pay to which you would otherwise be exifted under any provision of title 10 other than chapter 61 of that title.	nce, do e ry or retired hat it	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source and an Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international domestic terrorism; or compensation pension, pay, annuity, or allowance paid United States Government in connection with a disability, combat-related injuridisability, or death of a member of the uniformed services. If necessary, list of sources on a separate page and put the total below	or d by the ry or					
	•		\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You	\$	1,685.00	+ \$ _	3,482.00		5,167.00
12	Calculate your current monthly income for the year. Follow these steps:						
12.	12a. Copy your total current monthly income from line 11		Сор	y line 11	here=>	\$	5,167.00
	Multiply by 12 (the number of months in a year)					x 1	
12b. The result is your annual income for this part of the form					2,004.00		
13.	Calculate the median family income that applies to you. Follow these step	os:					
	Fill in the state in which you live.						
	Fill in the number of people in your household.						
	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 13.						
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse</i> .						
	Go to Part 3. Do NOT fill out or file Official Form 122A-2. 14b. Line 12b is more than line 13. On the top of page 1, check box 2.	, The pre	esumption of	f abuse is	determined b	y Form 12.	2A-2.
Part	Go to Part 3 and fill out Form 122A–2. Sign Below						
.=:11	By signing here, I declare under penalty of perjury that the information or	n this sta	atement and	in anv att	achments is t	rue and co	rrect.
	X /s/ Douglas Filardo	010		, all			
	Douglas Filardo Signature of Debtor 1						

Debtor 1	Douglas Filardo	Case number (if known)	
Da	te May 10, 2023 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	l .	

Douglas Filardo Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Debtor 1

Income for the Period 11/01/2022 to 04/30/2023.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Auto Sales/Repair
Constant income of _1,685.00 per month.
Constant expense of _0.00 per month.
Net Income _1,685.00 per month.

	Debtor 1 Douglas Filardo Case number (if known)	
--	-------------------------------------------------	--

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2022 to 04/30/2023.

Line 5 - Income from operation of a business, profession, or farm Source of Income: Healthcare Aide/Auto Broker
Constant income of 3,482.00 per month.
Constant expense of 0.00 per month.
Net Income 3,482.00 per month.

United States Bankruptcy Court Eastern District of New York

In r	e Douglas Filardo		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy.	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	5,000.00
	Prior to the filing of this statement I have received		\$	5,000.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspect	s of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] exemption planning; 	ment of affairs and plan which	may be required;	
6.	By agreement with the debtor(s), the above-disclosed fee Negotiations with secured creditors to re and applications as needed; preparation liens on household goods. Representation relief from stay actions or any other adversarial contents.	educe to market value; pro and filing of motions pur on of the debtors in any d	eparation and filin suant to 11 USC 5 ischargeability ac	22(f)(2)(A) for avoidance of tions, judicial lien avoidances,
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in
	May 10, 2023	/s/ Richard F. Art	ura	
_	Date	Richard F. Artura	1978006	
		Signature of Attorne Phillips, Artura &		
		165 South Wellw		
		Lindenhurst, NY	11757	
		631-226-2100 Fa Bankruptcy@pw		
		Name of law firm	qiaw.com	

United States Bankruptcy Court Eastern District of New York

In re	Douglas Filardo		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Richard F. Artura 1978006 Phillips, Artura & Cox 165 South Wellwood Avenue Lindenhurst, NY 11757 631-226-2100 Fax: 631-226-2160

USBC-44 Rev. 9/17/98

American Express National Bank c/o Becket and Lee LLP PO Box 3001 Malvern, PA 19355-0701

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Amex/Bankruptcy Po Box 679 Sioux Falls, SD 57117

Andrea Allani 396 3rd Street Apt 14 Brooklyn, NY 11215

Barclays Bank Delaware Attn: Bankruptcy PO Box 8801 Wilmington, DE 19899

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899

Bashian & Papantoniou, PC 500 Old Country Road Suite 302 Garden City, NY 11530

Berger Fischoff Shumer Wexler & Goodman LLP 6901 Jericho Turnpike Suite 230 Syosset, NY 11791

Cbna Po Box 6181 Sioux Falls, SD 57117 Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services PO Box 15369 Wilmington, DE 19850

Citibank Citicorp Cr Srvs/ Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank Citicorp Credit Srvs Centralized Bk Dept PO Box 790034 Saint Louis, MO 63179

Citibank Citicorp Credit Srvs Po Box 790034 Saint Louis, MO 63179

Citibank PO Box 6217 Sioux Falls, SD 57117

Citibank/The Home Depot Citicorp Credit Srvs Po Box 790034 Saint Louis, MO 63179

Citibank/The Home Depot PO Box 6497 Sioux Falls, SD 57117 Citibankna Citicorp Credit Srvs/Centralized BK Dept Po Box 790034 St. Louis, MO 63179

Comenity Bank/Wayfair Attn: Bankruptcy PO Box 182125 Columbus, OH 43218

Comenity Bank/Wayfair PO Box 182789 Columbus, OH 43218

CompuLink Corporation dba Celink 101 West Louis Henna Blvd Suite 450 Austin, TX 78728

Discover Bank Discover Products Inc PO Box 3025 New Albany, OH 43054-3025

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Discover Financial Pob 15316 Wilmington, DE 19850

Dsnb Bloomingdales Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040

Dsnb Bloomingdales Po Box 6789 Sioux Falls, SD 57117

Francine Filardo 27 Montauk Highway Westhampton, NY 11977-1211 Francine Filardo 27 Montauk Highway Westhampton, NY 11977-1211

Francine Filardo 27 Montauk Highway Westhampton, NY 11977-1211

Internal Revenue Service 10 Metrotech Center 625 Fulton Street Brooklyn, NY 11201

Internal Revenue Service 10 Metrotech Center 625 Fulton Street Brooklyn, NY 11201

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

JPMorgan Chase Bank NA sbmt Chase Bank USA NA c/o National Bankruptcy PO Box 9013 Addison, TX 75001

Light Stream 600 W Broadway Suite 2000 San Diego, CA 92101

LightStream/Suntrust Bank Truist Bank PO Box 1847 Wilson, NC 27894

Lincol Auto Finance PO Box 55000 Dept 194101 Detroit, MI 48255-1941

Lincoln Auto Finance PO Box 62000 Colorado Springs, CO 80962 Lincoln Automotive Fin Attn: Bankrutcy Po Box 54200 Omaha, NE 68154

LVNV Funding LLC Resurgent CapitalServices PO Box 10587 Greenville, SC 29603-0587

LVNV Funding LLC Resurgent CapitalServices PO Box 10587 Greenville, SC 29603-0587

Nordstrom FSB Attn: Bankruptcy Po Box 6555 Englewood, CO 80155

Nordstrom FSB 13531 E Caley Ave Englewood, CO 80111

NYS Department of Taxation & Finance Bankruptcy Section PO Box 5300 Albany, NY 12205-0300

NYS Dept of Taxation and Finance WA Harriman Campus Albany, NY 12227

PHH Mortgage Services 1 Mortgage Way Mail Stop: SVCF Mount Laurel, NJ 08054

Portfolio Recovery Associates LLC c/o Barclays BankDelaware POB 41067 Norfolk, VA 23541 Quantum3 Group LLC PO Box 788 Kirkland, WA 98083-0788

Selip & Stylianou, LLP PO Box 9004 199 Crossways Park Drive Woodbury, NY 11797-9004

Star Auto Sales of Queens c/o Milman Labuda Law Group PLLC 3000 Marcus Ave, Ste 3W8 New Hyde Park, NY 11042

Star Auto Sales of Queens 206-26 Northern Blvd Bayside, NY 11361

Suntrust Bank Attn: Bankruptcy MC Va-Rvw_6290 Pob 85092 Richmond, VA 23286

Suntrust Bank 303 Peachtree Street Northeast Atlanta, GA 30308

Truist Bank Attn: Bankruptcy Mail Code VA-RVW-6290 POB 85092 Richmond, VA 23286

Truist Bank 40 Northwoods Blvd Suite C Columbus, OH 43235

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Douglas Filardo	CASE NO.:.
		2(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the l.]
□ NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
THE FOLLOW	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.: 21 -	71691-reg JUDGE:Robert E	E Grossman DISTRICT/DIVISION: Eastern District of New York
CASE STILL PENI	DING (Y/N): N	[If closed] Date of closing: 03/08/2022
CURRENT STAT	US OF RELATED CASE: Dis	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above): Prior Filing 9/27/2021
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	EDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	Γ/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd) CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file. TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE: I am admitted to practice in the Eastern District of New York (Y/N): Y CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable): I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form. /s/ Richard F. Artura Richard F. Artura 1978006 Signature of Debtor's Attorney Signature of Pro Se Debtor/Petitioner Phillips, Artura & Cox 165 South Wellwood Avenue Lindenhurst, NY 11757 631-226-2100 Fax:631-226-2160 Signature of Pro Se Joint Debtor/Petitioner Mailing Address of Debtor/Petitioner City, State, Zip Code

Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009